		(Column 1)		(Column 2)	(Column 3)			
DMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
2	Total		Minus	**	=			
AME	Independent	*	Minus	AAA	=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

OR

X84=

+280=

ADDIT. FEE

TOTAL

X42=

+140=

ADDIT. FEE

TOTAL

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application r Docket Number

		CLAIMS AS	(Column 1)	「I (Colur	nn 2)	SMALL E	NTITY	OR	OTHER SMALL I	to a second
TO	TALCLAIMS					RATE	FEE		RATE	FEE
ιρο			NUMBER FILED	NUMBE	R EXTRA	BASIC FEE	355.00	OR	BASIC FEE	710.00
Ó	AL CHARGEA	BLE CLAIMS	46 minus 20=	= 2	5	X\$ 9=	4.0	OR	X\$18=	488 Z
ND	EPENDENTICL	AIMS 🗼	5 minus 3 =	= 1		X40=		OR	X80=	80.
	A Commence	DENT CLAIM PF	RESENT			+135=		OR	+270=	242.48 242.48
	he difference	in column 1 is l	ess than zero, en	ter "0" in c	olumn 2	TOTAL	21.7	OR	TOTAL	1384
	CI	LAIMS AS A	MENDED - PA	RT II			XX.	1 4	OTHER	THAN
		(Column 1)		lumn 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
HATA.		CLAIMS REMAINING A AFTER AMENDMENT	PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	* 4	RATE	ADDI- TIONAL FEE
	70E)	ill.	Minus **	46		X\$.9=	a Salarina	ΟЯ	X\$18=	- 10 TO
AWIE	Independent	77	Minus ***	4	=	X40=		OR	X80=	The same
	FIRST/PRESE	NTATION OF MI	DETIPLE DEPENDE	NI CLAIM		+135=.	. W.	OR	+270=	
						TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
	Z. J. W.	(Column 1)	(Co	lumn 2)	(Column 3)	/* .		Na Sign	6 20 8 4 4 A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
ENTER		CLAIMS REMAINING AFTER AMENDMENT	NI PRE	GHEST UMBER VIOUSLY ID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ĭ	Total	Act Bar	Minus **			X\$ 9=	11.1.5.4	OR	.X\$18=∶	SANGA A
AME	Independent	क्रांस्ट्रेनिय एक्ट	Minus ***		=	X40=	1,000.00	OR	X80=	
1700	FIRST PHESE	NIATION OF MU	JLTIPLE DEPENDE	NI CLAIM		+135=		OR	+270=	
•	·					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	(Co	lumn 2)	(Column 3)		-		ADDITITE EL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HI NI PRE	GHEST UMBER EVIOUSLY ND FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	•	Minus **		=	X\$ 9=		OR	X\$18=	· j.
ME	Independent	*	Minus ***		=	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDE	NT CLAIM					+270=	
•	f the entry in colu	mn 1 is less than t	he entry in column 2, v	vrite "0" in co	lumn 3.	TOTAL		OR		<u> </u>
**	If the "Highest Nu	mber Previously Pa	aid For" IN THIS SPAC aid For" IN THIS SPAC	CE is less tha	n 20, enter "20)." ADDIT. FEE		OR	TOTAL ADDIT: FEE	
	The "Highest Nur	nber Previously Pa	id For" (Total or Indepe	endent) is the	highest numb	er found in the a	ppropriate bo	x in co	olumn 1.	